

Retail Food Establishment Inspection Report

Floyd County Health Department Telephone:812-948-4726

X678

Based on an inspection this day, the item(s) noted below identify violations of 410 IAC 7-24, Indiana Retail Food Establishment Sanitation Requirements. The time limit for correction of each violation is specified in the narrative portion of this report.

B . 111 1				T-27.			
Bob Evans Restaurant #575				Telcphone Number \$12.948-0938	Date of Inspection (mm/dd/yr)		PERMIT # 19-
Establishment Address (number and street, city, state, zip code)					1-2	Y-20	3/
Establishment Address (number and street, city, state, zip code) 2204 State St. New Albany IN 47150				614-497-4755			36
Owner O / 5				Purpose:	Follow-u	· I	se Date
Bob Evons Farms				1. Routine	NO	10	day
Owner's A	ddress	1:11	Rd New Albany, OH 43054	2. Follow-up	Summary of Violations:		
Person in C	Thomas			3. Complaint	l /		2 A
	Jet	$F_{\Gamma \ell}$	ey Hedrick	4. Pre-Operational	C / NC Z R		
Responsibl				5. Temporary	Menu Type (See back of page)		
				6. HACCP		(·, p.a.g.o,
Certified F	ood Manas	er		7. Other (list)	1 2 3 4 5		
		, C	Leffery Hedrick 11-8-23		*	3	_43
• CRITICAL ITEMS ARE IDENTIFIED IN THE CHECKLIST AND NARRATIVE COLUMNS MARKED "C"							
• VIOLATION(S) REPEATED FROM PREVIOUS INSPECTIONS ARE DENOTED IN THE "SUMMARY OF VIOLATIONS" AND IN THE NARRATIVE BELOW AS "R"							
Section#	C/NC	R	Narrative	AND	XII 11110 I		
438		I		1././		./ /	rrected By
	<u></u>	-	Observed spray bottle with			7004	27
218	NC		Observed Cooler door new	ur batter mix			
			to be unable to closed o	lue to gasket		3 de	كرا
422	NC		Observed employee food not	clearly marked		Corre	41
			or seperated.	0.00- / //	_	CON	<u>C/ C//</u>
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			-				
		\vdash					
							<u> </u>
· 							
Received by (name and title printed): Inspected by (name and title printed):							
JEFFRRY HEDRICK Shift LEADER Thomas Saider, EHS							
Received by (signature): Inspected by (signature):							
4.01	Ly Y	4Lx	Vick Shelt & appolar	Hanne	~ — ~~~		
cc:							